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CONFIRMATION NO. 1511

<b>SERIAL NUMBER</b> 10/821,721	<b>FILING OR 371(c) DATE</b> 04/09/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3735	<b>ATTORNEY DOCKET NO.</b> 45568-00457
<b>APPLICANTS</b> Robert Edwin Schneider, Erie, CO; Travis Rian Andrews, Boulder, CO;				
<b>** CONTINUING DATA *****</b> <i>none</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>none</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 06/24/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>[Signature]</i> Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CO	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 33
			<b>INDEPENDENT CLAIMS</b> 3	
<b>ADDRESS</b> 25231				
<b>TITLE</b> Implantable hearing aid transducer retention apparatus				
<b>FILING FEE RECEIVED</b> 1152	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	